

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

MASS PAC

ADDRESS (number and street)

PO BOX 440324

☐Check if different
than previously
reported. (ACC)

SOMERVILLE

MA

02144

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00417295

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☒October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

28

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brian M Mount

Signature of Treasurer

Electronically Filed by Brian M Mount

Date

10

13

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
MASS PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	2	8	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		58556.43
(b) Cash on Hand at Beginning of Reporting Period	83874.39	
(c) Total Receipts (from Line 19)	0.00	62649.93
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	83874.39	121206.36
7. Total Disbursements (from Line 31)	30551.60	67883.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	53322.79	53322.79
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

MASS PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	2	8	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	30100.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	30100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	32500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	0.00	62600.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	49.93
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	62649.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	62649.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4551.60	18131.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	4551.60	18131.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	17000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26000.00	32000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	752.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	30551.60	67883.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30551.60	67883.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	62600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	62600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4551.60	18131.57
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4551.60	18131.57

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
MASS PAC

A.	<p>Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address PO Box 15153</p> <p>City Wilmington State DE Zip Code 19886-5153</p> <p>Purpose of Disbursement credit card charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4665</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="151.60"/></p>
B.	<p>Full Name (Last, First, Middle Initial) Erickson & Company</p> <p>Mailing Address 38 Ivy St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement consulting services for MASS PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4664</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="750.00"/></p>
C.	<p>Full Name (Last, First, Middle Initial) Erickson & Company</p> <p>Mailing Address 38 Ivy St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement consulting services for MASS PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4670</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="750.00"/></p>

SUBTOTAL of Disbursements This Page (optional)

1651.60

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

A.

Full Name (Last, First, Middle Initial)
Lisa Mila FarmerMailing Address 241 Boston ST
#2City State Zip Code
Dorchester MA 02125Purpose of Disbursement
consultin/fundraising for MASS PAC

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4669

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	8

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
Greater Boston Management Co.

Mailing Address 404 S. huntington Ave

City State Zip Code
Jamaica Plain MA 02130Purpose of Disbursement
Rent/Utilities

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4663

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	8

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)
National Democratic Club

Mailing Address 30 Ivy St., SE

City State Zip Code
Washington DC 20003Purpose of Disbursement
meals for MASS PAC - credit card charge

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4667

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

Amount of Each Disbursement this Period

45.80

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MASS PAC

A.

Full Name (Last, First, Middle Initial)

Tune INN

Mailing Address 331 Pennsylvania Ave

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
meals for MASS PAC - credit card charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4666

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2008

Amount of Each Disbursement this Period

105.80

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

4551.60

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

A. Full Name (Last, First, Middle Initial)
BERKOWITZ FOR CONGRESS

Mailing Address PO BOX 91365

City ANCHORAGE State AK Zip Code 99509

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: AK District: 00

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.4687

Date of Disbursement

09 / 16 / 2008

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
CAZAYOUX FOR CONGRESS

Mailing Address POB 3172

City Baton Rouge State LA Zip Code 70821

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: LA District: 06

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.4675

Date of Disbursement

09 / 16 / 2008

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
JIM HIMES FOR CONGRESS

Mailing Address 65 High Ridge Road Box 456
BOX 456

City Stamford State CT Zip Code 06905

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CT District: 04

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.4691

Date of Disbursement

09 / 16 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC**A.** Full Name (Last, First, Middle Initial)
JOHN BOCCIERI FOR CONGRESS

Mailing Address PO BOX 3016

City ALLIANCE State OH Zip Code 44601

Purpose of Disbursement
contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 16

Transaction ID: SB23.4689

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
KAGEN 4 CONGRESSMailing Address 100 W. College Ave.
50 D

City Appleton State WI Zip Code 54911

Purpose of Disbursement
contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: SB23.4677

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
KATHY DAHLKEMPER FOR CONGRESS

Mailing Address 530 SEMINOLE DRIVE

City ERIE State PA Zip Code 16505

Purpose of Disbursement
contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 03

Transaction ID: SB23.4671

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC**A.**Full Name (Last, First, Middle Initial)
LAMPSON FOR CONGRESS

Mailing Address P.O. Box 58606

City Houston State TX Zip Code 77258

Purpose of Disbursement
contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 22

Transaction ID: SB23.4679

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	8

Amount of Each Disbursement this Period

2000.00

B.Full Name (Last, First, Middle Initial)
MASSA FOR CONGRESS

Mailing Address 59 EAST MARKET STREET SUITE 244

City CORNING State NY Zip Code 14830

Purpose of Disbursement
contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 29

Transaction ID: SB23.4693

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	8

Amount of Each Disbursement this Period

2000.00

C.Full Name (Last, First, Middle Initial)
MIKE LUMPKIN FOR CONGRESSMailing Address 425 W 5th Avenue
Suite 205

City Escondido State CA Zip Code 92025

Purpose of Disbursement
contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 52

Transaction ID: SB23.4696

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	8

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

A. Full Name (Last, First, Middle Initial)
NANCY BOYDA FOR CONGRESS

Mailing Address PO Box 1474

City State Zip Code
Topeka KS 66601

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 02

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.4685

Date of Disbursement

09 / 16 / 2008

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
PENNSYLVANIANS FOR KANJORSKI

Mailing Address 103 South Hanover Street

City State Zip Code
Nanticoke PA 18634

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 11

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.4683

Date of Disbursement

09 / 16 / 2008

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
SKELLY FOR CONGRESS

Mailing Address P.O. Box 271512

City State Zip Code
Houston TX 77277

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 07

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.4694

Date of Disbursement

09 / 16 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MASS PAC

A.

Full Name (Last, First, Middle Initial)
TIM MAHONEY FOR FLORIDA

Mailing Address 2000 PGA Blvd.
Suite 3230

City State Zip Code
Palm Beach Gardens FL 33408

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 16

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.4681

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

26000.00